

## Joliet Region Chamber of Commerce Energy Program Application

Company Name (Legal Entity) \_\_\_\_\_

Parent Company (If Subsidiary) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Main Phone \_\_\_\_\_

Current Gas Supplier \_\_\_\_\_ Contract End Date \_\_\_\_\_

Current Electric Supplier \_\_\_\_\_ Contract End Date \_\_\_\_\_

.....

Primary Contact Name \_\_\_\_\_

Title \_\_\_\_\_

Phone Number \_\_\_\_\_ Ext \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

.....

Please fill out the attached documents and send to Mike Holmes via email,  
mholmes@vanguardenergy.net or fax, 630-955-0989.

**\*Disclaimer\***

Participation in the Joliet Region Chamber of Commerce Energy Program through Vanguard Energy Services, L.L.C. requires active membership in the aforementioned chamber. If your membership with the Chamber becomes inactive, then you will be removed from the Chamber's Energy Program unless the account is brought current.

**ACCOUNT INFORMATION RELEASE AUTHORIZATION FORM (Rev. 02-12-07)**

*This document authorizes Commonwealth Edison Company ("ComEd") to release to you or your agent, available billing and usage data, Peak Load Contribution (PLC) values and/or Post 2006 Supply Group data.*

*The following types of data are available:*

**Summary Data** – Kilowatt-hour, kilowatt and dollar amount billed summarized by account per billing period. There is no charge for summary data with the exception of written requests for data exceeding 10 accounts. A \$5.00 postage and handling fee will be charged for each account in excess of the first 10 accounts on a single request.

**Interval Data** – Half-hour demand data for non-residential accounts having recording-type meters. A \$22.00 fee per meter on the account will be charged for all interval data requests.

**Meter-Level Summary Data** – Kilowatt-hour, kilowatt and Peak kilowatt demand data, where applicable, summarized by individual meter for each active meter on the account per billing period. A \$5.00 fee per meter on the account will be charged.

**PLC Value** – A customer's contribution to a zone's normalized summer peak load, as estimated by the zone's Electric Distribution Company (EDC). PLC is used to determine a Load Serving Entity's (LSE's) Obligation peak load.

**Post 2006 Supply Group** – Each customer has been assigned to a supply group per Rider CPP- Competitive Procurement Process.

**1. Customer Information:** *(Required)*

Account Name: \_\_\_\_\_ \*Account Number: \_\_\_\_\_

\* Meter Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Usage Data Type:  Summary  Interval  Meter-level Summary  PLC Value  Supply Group

Delivery Method:  CD Rom  Email  US Mail – (Not available for Interval Data)

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email Address: \_\_\_\_\_

*\*For multiple accounts, please list all account and meter numbers on a separate sheet and attach with this form.*

_____	_____
Customer Name	Title
_____	_____
Customer Signature	Date

**2. General Account Agents/Suppliers:** *(Required only if data is to be delivered to an Agent or Supplier)*

Agent/Supplier Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**3. Billing Information:** *(Required for all interval & meter summary, summary data requests in excess of 10 accounts.)*

Charge Customer's ComEd Account Account Number: \_\_\_\_\_

Charge Separate Invoice *(Complete information below only for Separate Invoice)*

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_







850 East Diehl Road, Suite 142  
Naperville, IL 60563  
Office 630-955-1500 Fax 630-955-0989

**APPLICATION FOR CREDIT**

COMPANY NAME (Legal Entity) \_\_\_\_\_

Parent Company (if subsidiary) \_\_\_\_\_

Street Address (Legal Entity) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Corporation \_\_\_\_\_ Incorporated State \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietor \_\_\_\_\_

Privately or Publicly held? \_\_\_\_\_ Federal ID# \_\_\_\_\_

DUNS# \_\_\_\_\_ DUNS Rating \_\_\_\_\_

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Who was your previous supplier? \_\_\_\_\_ Duration of Service \_\_\_\_\_

May we call the previous supplier for a credit reference? \_\_\_\_\_

<u>BANK REFERENCE</u>	<u>ADDRESS</u>	<u>PHONE NO.</u>	<u>FAX NO.</u>
_____	_____	_____	_____

Contact: \_\_\_\_\_

<u>TRADE REFERENCE</u>	<u>ADDRESS</u>	<u>PHONE NO.</u>	<u>FAX NO.</u>
_____	_____	_____	_____

Contact: \_\_\_\_\_

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The undersigned understands the following information is being submitted for the purpose of obtaining credit and also authorizes the investigation of this information through banks and references cited herein.

Amount of Credit Requested \_\_\_\_\_ Rep Name **Mike Holmes – Joliet Region Chamber**

The undersigned confirms that all information contained in and with this credit application is true and accurate. Any false, inaccurate and/or misleading information could result in the immediate demand of payment and revision of credit terms and agreements.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_